| AMENDMENT TRANSMITTAL LETTER  |                              |                                 |                        |                      |  | Docket No.<br>03108/0201078-US0 |  |
|---|------------------------------|---------------------------------|------------------------|----------------------|--|---------------------------------|--|
| Application No.   |                              | Filing Date                     |                        | Examine              |  | Unit                            |  |
| 10/810,343  |                              | March 26, 2004                  |                        | D. R. Ra             | ) 16   | 1624                            |  |
| oplicant(s): Pala   | aniappan Srini               | /asan et al.                    |                        |                      |  | _                               |  |
| vention: SUBST  |                              | DROPYRIMIE                      | INONE PREI             | PARATION USING       | POLYANILINE S                                    | ALT                             |  |
|   | TC                           | THE COMMI                       | SSIONER FO             | OR PATENTS           |  |                                 |  |
| ransmitted here   | with Is an ame               | ndment in the                   | above-identifi         | ied application.     |  |                                 |  |
| he fee has beer   | calculated an                | d is transmitte                 | d as shown b           | elow.                |  |                                 |  |
|   |                              | CLAIM                           | S AS AMENI             | DED                  |  |                                 |  |
|   | Claims<br>Remaining<br>After | Highest<br>Number<br>Previously | Number<br>Extra Claims |                      |  |                                 |  |
| Total Claims  | Amendment<br>10              | - 20 =                          | Present                | Rate                 | <del></del>                                      | _                               |  |
| Independent   | 1                            | - 3 =                           |                        | ×                    | 1  |                                 |  |
| Claims<br>Multiple Depend   | lent Claims (ch              | ack if applicabl                | a) []                  |                      | <del>                                     </del> |                                 |  |
| Illiantiple Depend  | en en al                     | сок п аррисаы                   | <u> </u>               |                      | <u> </u>   |                                 |  |
| Other fee (please specify): Extension for response within third month |                              |                                 |                        |                      | 1,020.00   | )                               |  |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:                              |                              |                                 |                        |                      | 1,020.00   |                                 |  |
| x Large Entity  |                              |                                 |                        | Small Entit          | y  |                                 |  |
| No additiona  | l fee is require             | d for this amer                 | ndment.                |                      |  |                                 |  |
|   | ge Deposit Acc               |                                 |                        | the amount of \$     |  | . •                             |  |
| A check in th   | ne amount of \$              |                                 | to cover               | the filing fee is en | closed.  |                                 |  |
| x Payment by  |                              |                                 |                        | -                    |  |                                 |  |
|   | is hereby auth               |                                 |                        | Deposit Account I    | No04-0100  | _                               |  |
| _   | v overpavmer                 |                                 |                        |                      |  |                                 |  |
| X Charge a  | nv additional fili           | no or applicatio                | n processing f         | ees required under   | 37 CFR 1,16 and 1                                | 17                              |  |
|   |                              |                                 | poooug                 | oo roquirou unus     |  |                                 |  |
|   | 000                          | <u></u>                         |                        | Dated:               | December 26, 200                                 | 6                               |  |
| Adda Q. Gogori<br>Attorney/Agent                                      |                              | 714                             |                        |                      |  |                                 |  |
| DARBY & DAR   | BY P.C.                      |                                 |                        |                      |  |                                 |  |
| P.O. Box 5257   | Vork 10150 6                 | 257                             |                        |                      |  |                                 |  |
|   | 101K 10130"3                 | 201                             |                        |                      |  |                                 |  |
| New York, New<br>(212) 527-7727                                       |                              |                                 |                        |                      |  |                                 |  |
|   |                              |                                 |                        |                      |  |                                 |  |
|   |                              |                                 |                        |                      |  |                                 |  |